ON THE STUDY

OF THE

MATERIA MEDI

AN INTRODUCTORY ADDRES

... of the opening of the Class of Materi

The London School of Homœopathy.

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ALFRED C. POPE, M.D.,

MEMBER OF THE ROYAL COLLEGE OF SURGEONS, VICE-PRESIDENT OF
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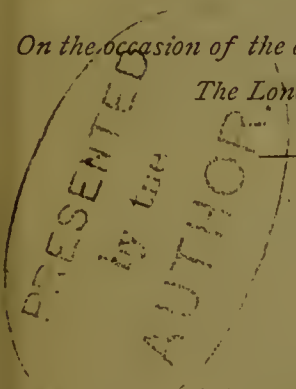

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THE STUDY

OF

MATERIA MEDICA.

GENTLEMEN,

The Materia Medica—those medicinal substances employed by the physician to modify the health of the body—constitutes the most important department of therapeutics.

The years are not many since, when, together with venesection, the employment of drugs might be said to comprise the entire scope of therapeutics. It is far otherwise to-day. The wave of scepticism, as to the advantage of prescribing drugs at all, which began to sweep over the profession some thirty years ago, led to more diligent enquiry being made into other sources of influencing the bodily health—a class of, to all intents and purposes, remedial measures—termed hygienic—became the object of much increased thought, much more careful and more elaborate research. Climate, food, dress, exercise, rest—which has had a fair-sized octavo volume devoted to its consideration as a therapeutic agent—the use of water at different degrees of temperature, nursing, to say nothing of electricity—all have been pressed into the service of the physician, all

have received an amount of enquiry which has resulted, not only in affording much help to the sick, but has been fraught with many advantages to those in the enjoyment of health.

Drugs, however, are far from having been abandoned as therapeutic agents. Some may account them as of little more service than to influence favourably the mind of the patient, as "aids to faith in the weary time," as Dr. MOXON, of Guy's, described them; but they are still used with a definite purpose, in full confidence that the purpose designed is a desirable one, and will prove useful to the sick by the vast proportion of medical men. Faith in drugs as therapeutic agents is not dead—nay, more, it is stronger now than it was some years ago. The present method of studying drugs, derived from that of HAHNEMANN (of which we have a good example in the study of *gelsemium* by Drs. RINGER and MURRELL), of ascertaining what they will effect when introduced into the body, is more exact, more carefully applied than it was thirty years ago. The uses to which drugs may be put, in the full expectation that they will fulfil the object wherewith they are prescribed, are far better known now than they were at that period. The works of Dr. SIDNEY RINGER and Dr. CHARLES PHILLIPS, in this country, of Dr. WOOD, and Professor BARTHOLOW (of Philadelphia), have taught the great body of the profession a great deal that they were previously unacquainted with. In so far, then, these gentlemen have done, however incompletely, a very useful work. My only regret is that they have not done it in a manner more worthy of the profession of medicine and of the positions they occupy in it. It is true that there is scarcely an *original* observation of practical therapeutic value in the volumes of either one

of them—it is true that neither has given the profession any clinical hint of importance that had not been known and published many years before; but all this, notwithstanding—and though ungenerously ignoring the work accomplished by HAHNEMANN, to whom they, in common with ourselves, owe so much—they have done useful service in that they have enabled physicians, who were by prejudice and other influences debarred from looking into homœopathic literature, to become acquainted, in an empirical way, with some of the results of homœopathic practice. They have made more widely known therapeutic applications of drugs that, in the phraseology of one author, had "already arrested attention." They have not, however, dared to point out how this attention came to be arrested, and have in the majority of instances carefully refrained from stating whose attention it was that was so arrested. One of the objects I shall set before me in the lectures I shall have the honour of delivering in this place will be to direct you to the sources whence these writers have drawn their inspirations; to show *how* it has been ascertained that such and such a drug has been found good for so-and-so; to explain to you why it is so; and to point out the means by which you may not only utilise, but utilise with much greater precision and consequently greater success than the works I have named will enable you to do—the results which have been derived from the discovery of the law of similars, and the accumulation of a Materia Medica which has been fully examined by experiments on healthy persons, and successfully tested in the treatment of disease.

To-day I will first of all ask your attention to the consideration of what the Materia Medica is; and, secondly, how it is to be studied and applied in practice. To

be an article of Materia Medica, a substance must be possessed of the power of modifying in the direction of disturbance the health of the body in some one or more of its functions. It is in the possession of this power that a substance which is a drug differs from one that is a food. The food builds up all the tissues,—the drug irritates one or more of them.

Furthermore, for a drug to be recognised as an article of Materia Medica it is necessary that we have a knowledge of the direction in which the health of the body is disturbed or modified by it.

In order that we may be able to take advantage of the homœopathic law as a guide in practice, more than a knowledge of the mere direction in which a drug acts, of the tract or organ which it influences is required. We must know how it influences the tissues, must understand its mode of action, the kind of action it exerts, or at any rate must be well informed as to how it manifests its influence upon them. The simple fact that a drug produces diarrhœa is not sufficient to justify us in prescribing that drug in every case of diarrhœa we meet with. In order to get a truly curative agent in such a case, we must endeavour to ascertain the morbid condition of which the diarrhœa is the practical outcome, both in the case of the drug and of the disease. At any rate, we must ascertain the mode in which the drug diarrhœa and the natural diarrhœa are expressed. The character and frequency of the stools, the presence or absence of pain, and when present, its position, its character, and the conditions under which it is aggravated or relieved,—these, together with concomitant symptoms, symptoms that are present at the same time in the head, chest, or other part of the body, must be

carefully studied, ere we can be fully satisfied that we have a homœopathic remedy for our case of diarrhœa.

In forming a diagnosis, in the endeavour, that is, to trace the diarrhœa to some specially disturbed tissue or condition, we direct our attention to just such circumstances as those I have now detailed; on the results of our enquiries do we form our conclusion as to the disease with which we have to deal. The action of a drug on the healthy body gives rise to an artificial disease, and the tissues affected are to be ascertained precisely in the same way as they are in natural disease. Hence we have to study the actions of drugs much in the same manner as we have to investigate the processes we call diseases. We have to examine the symptoms produced by each drug, and endeavour to trace them to some definitely disordered condition. Occasionally our best designed efforts in this direction will fail, and then we fall back upon a minute comparison of the indications of the morbid process at work, with those afforded by drugs of the morbid processes they set up. Feeling, in so doing, thoroughly assured that when the manifestations —the symptoms—are, in their totality, closely alike, the conditions determining both are very similar.

Thus you will see that to obtain the advantage from the law of similars, in selecting a medicine to cure a given morbid condition, you cannot determine your choice by the nosological definition of that condition. For instance, in so common and well marked a disease as scarlatina, in many instances *belladonna* will answer your purpose in prescribing a medicine better than any other, but the cases are numerous, and in my experience, increasing in frequency, where *belladonna* is of no use at all, and that simply because it does not correspond in

the symptoms it produces on the healthy with those in the case before you. In such cases probably *carbonate of ammonia*, *apis mellifica*, *rhus toxicodendron*, or *stramonium*, or *ailanthus glandulosa* will be far more efficient, for the simple reason that they are far more homœopathic. It is not not, mind you, because *belladonna* is a useless medicine in scarlatina that it fails you in a particular case, but because it was not *the* homœopathic remedy in that case. As illustrating this point, let me cite a case from a very interesting paper by Dr. BAYES, on Intermittent Fever, recorded in the *Annals of the British Homœopathic Society* (vol. i. p. 457).

"The first of these four cases," says Dr. BAYES, "was the longest case of intermittent I have treated; the patient was nine weeks under treatment. I gave several remedies in succession with little effect—*quinine*, *china*, both in bulk and various dilutions, *arsenicum*, &c. At last I did what I ought to have done at first, carefully consulted the symptomatology, and gave *phosphoric acid*, which speedily reduced the volume of the symptoms and finally cured the disease." Dr. BAYES has informed me that the symptoms in this case were those of a short cold and a sharp hot stage, followed during the night by profuse and exhausting perspiration, thus showing a close analogy to those produced by *phosphoric acid*.

In this case many of the symptoms were similar to those typical of cinchona and arsenical fevers; but there was some condition existing, pathologically inappreciable, but of sufficient importance to render the whole morbid state unamenable to any remedy which did not correspond to the symptoms of this inexplicable peculiarity, as well as to the more prominent and better understood symptoms of the fever. No alteration of the

dose or dilution availed; the medicine chosen it was that was in fault; this being corrected the disease yielded.

While, then, the right comprehension of a medicine's sphere of action, or a correct understanding of the nature of its effects on individual organs and tissues are essential to enable us to appreciate the value, interpret the meaning, and gather the connection of the various symptoms occurring in different parts of the body—we must not rest satisfied with this amount of knowledge. We must carefully study the individual peculiarities of each drug, if we desire to be as successful in curing disease as the means at our disposal admit of our being.

It is to allow of our prescribing, not merely for diseases, but for cases of disease, that the Materia Medica has received that amount of painstaking, careful and minute examination that it has done from HAHNEMANN, and by all who have endeavoured to follow in his footsteps.

Let me now explain to you the method which has been adopted in the examination of each article of Materia Medica.

In the first place, it was recognised by HAHNEMANN, from the very outset of his investigations, that, to be of practical value, the knowledge of the powers of each substance used as a medicine must be obtained from experiments made with it upon human beings, upon men and women. Experiments made upon the lower animals have a value, but it is as confirming, and, in a sense, interpreting observations made upon human beings. An animal drugged to death shows, in the *post mortem* examination, the tissues which have been disordered

during life and, in so far, enables us to trace with greater confidence, perhaps, than we otherwise could do, the course and direction of the lesions of which the symptoms observed in the human being were the expression. This source of knowledge is however limited, and, in actual prescribing, of much less importance than it would seem to be at first sight.

In the proving of drugs upon himself and his coadjutors, in the construction of a Materia Medica,—which he termed "Pure,"—not, as Dr. CONSTANTINE HERING has explained, because he regarded it as "spotless" or faultless, but as being "free from fiction," from preconceived theory or hypothetical notions, and as embodying the results of pure observation of the phenomena produced by drugs upon the healthy organism — in the construction of this Materia Medica, HAHNEMANN insisted chiefly on the purity and genuineness of the substance taken, (*Organon*, § cxxii.); that it should be taken in the simplest possible form (*op. cit.* § cxxiii.); that "during all the time the experiment lasts the diet be strictly regulated" (*op. cit.*, § cxxv.); while in a foot-note he says: "The subject of the experiment must either be not in the habit of taking pure wine, brandy, coffee or tea, or he must have totally abstained for a considerable time previously from the use of these injurious beverages, some of which are stimulating, others medicinal."

He also insisted upon the prover being in good health at the time he commenced his experiments, and on his being free from all disturbing mental influences during it.

The next direction is that "the medicines must be tested on both males and females, in order to reveal the

alterations of the health they produce in reference to the sexual system."

The doses of medicine given by HAHNEMANN in his experiments varied at different periods of his career. In his earlier enquiries we learn his method from his essay *The Medicine of Experience (Lesser Writings*, translated by DUDGEON) where he writes: "In order to ascertain the effects of medicinal agents, we must give only one pretty strong dose to the temperate healthy person who is the subject of the experiment; and it is best to give it in solution. If we wish to ascertain the remaining symptoms which were not revealed by the first trial, we may give to another person, or to the same individual, but to the latter only after the lapse of several days, when the action of the first dose is fully over, a similar or even stronger portion, and note the symptoms of irritation thence resulting in the same careful and sceptical manner. For medicines that are weaker we require, in addition to a considerable dose, individuals that are healthy, it is true, but of very irritable delicate constitutions."

Such are the leading instructions given by HAHNEMANN on "proving." That they evince the greatest caution in observing, no one, I think, can deny, while from all we know of the character of HAHNEMANN we may be perfectly certain that what he directed his pupils and co-workers to do was done. That he had exercised the greatest care in collecting his observations, that he had studied them in a "sceptical manner," has been shown by Dr. CONSTANTINE HERING, of Philadelphia, by whose recent death, the last link connecting us with HAHNEMANN'S period of drug proving, has been severed. Dr. HERING says: "HAHNEMANN'S way of conducting

provings was the following. After he had lectured to his fellow workers on the rules of proving, he handed them the bottles with the tincture, and when they afterwards brought him their day books, he examined every prover carefully about every particular symptom, continually calling attention to the necessary accuracy in expressing the kind of feeling, the point or locality, the observation and the mentioning of everything that influenced their feelings, the time of day, &c. When handing their papers to him, after they had been cross-examined, they had to affirm that it was the truth, and nothing but the truth, to the best of their knowledge, by offering their hands to him—the customary pledge at the Universities of Germany instead of an oath. This was the way in which our master built up his *Materia Medica.*" *

In so far then as the contributions to the Materia Medica made by HAHNEMANN and his disciples are concerned, we have ample ground for believing that the work was most conscientiously done.

In addition to these, HAHNEMANN'S researches into the literature of medicine supplied him with a large fund of symptomatology, drawn from cases of poisoning and of overdosing. Such symptoms are, in the original editions of *The Materia Medica Pura*, classed under the heading *Observations of Others.* To each symptom is appended the reference to the author from whom it was taken. That much care was bestowed upon this part of his labour, and that at the same time his accuracy was not absolute and his inferences were not uniformly sound, has been proved by the labours of DR. RICHARD HUGHES, who has been through the whole, I believe, of these

* *Hughes' Pharmacodynamics*, 4th edition, p. 23.

Observations of Others, so far as they were derived from reports of cases of poisoning and overdosing, and has traced all, or nearly all such to their original sources. Several important and valuable corrections have resulted from Dr. HUGHES' study, but at the same time it must be acknowledged that HAHNEMANN'S claim to our confidence has received additional strength from the large proportion to which so acute a critic could take no exception. These corrections all appear in that veritable *magnum opus*, the *Encyclopædia of Materia Medica*, which has been published by DR. ALLEN, of New York. In this work each symptom is referred to its own authority, and under the head of that authority is given all available information regarding the circumstances under which the observation was made. The symptoms themselves, thus illuminated to their utmost, are also corrected or bracketed as dubious wherever required.

Before proceeding to point out other sources of drug-proving I may here give a very striking illustration of the accuracy of HAHNEMANN in recording drug symptoms, sensations that is correctly traceable to drug action.

M. TROUSSEAU had on one occasion lectured upon *arsenic*, and in doing so he said, "We will not speak here of the singular reveries of hypochondriac homœopaths, and the innumerable symptoms they have discovered in *arsenic*; we leave them in the ideas which they cherish, and which they force themselves to believe."

DR. IMBERT-GOURBEYRE, the Professor of Materia Medica at Clermont-Ferrand, was at that time considering the subject of homœopathy. TROUSSEAU'S remark gave him the clue to a method of ascertaining for himself whether the symptoms attributed to *arsenic*, and, *à fortiori*, to all other drugs by HAHNEMANN, were as

delusive as TROUSSEAU had declared them to be. He determined to examine the action of this drug for himself, and to study it thoroughly, the result he has given in the following words :—

"I took *arsenic* in preference, just on account of this passage from TROUSSEAU. Who spoke the truth, HAHNEMANN or TROUSSEAU? Must I pass over to the side of HAHNEMANN, or remain in the ranks of the majority? Such was the problem I had to solve. I did not hesitate to study it exhaustively, and set to work first by searching out all that had been recorded on the subject. I have consulted all the books, monographs, essays, and theses on *arsenic*. There does not exist the smallest observation of arsenical poisoning in all degrees which I have not verified. I have given a place in my library to all that has been published on this subject in Europe as well as America, in France as well as in Germany, in England, in Sweden, in Russia, in Italy, and everywhere. Not only did I wish to read everything, but I desired to see and repeat for myself the experiments with *arsenic*, in doses varying from that commonly used, up to the highest infinitesimal degree; and after this arduous work, which has now lasted nearly fifteen years, and which goes on yet, what was my astonishment when I saw that HAHNEMANN, in describing these numerous symptoms of *arsenic*, was in agreement with all tradition, with a thousand observations of poisoning, published by toxicologists, with a thousand physiological facts, published by the allopaths themselves; while at the same time, I saw the same facts perpetually repeated in my personal experiments. Thenceforward I hesitated no longer; I was sure of the truth; I had mastered it; it must be defended. I ventured into print, and I demonstrated the value of that which M. TROUSSEAU had denied with so much assurance, in a series of essays, wherein is proved the reality of the eruptions, the palsies, the articular pains, the febrile accidents, caused by *arsenic*, and of a crowd of other symptoms belonging to that medicine. My labours even show that the number of symptoms caused by arsenic is still greater than that given by HAHNEMANN."

While the work accomplished by HAHNEMANN constitutes the foundation of our Materia Medica, and is probably that portion of it which has been best done, and received the largest amount of clinical confirmation, numerous additions to it have been made by German, French, American and English observers. These additions have been acquired both by direct experiment, and also from the records of cases of poisoning. Of such observers, Professor JÖRG, of Leipsic, was one of the best known. He was no follower of HAHNEMANN, but recognised in the proposed method of drug-proving a better means of acquiring a knowledge of the action of remedies than any that had been set forth. His observations were published in Leipsic in 1824, and consisted of experiments made with thirteen drugs. Dr. HUGHES (*op. cit.*, p. 42) says of them: "All these substances were taken in moderate doses repeated (and if necessary increased) until a decided impression was made. The experiments of each prover are related in full, just as they were made, and as the symptoms occurred. In the preface a description is given of the age, temperament, and constitution of those engaged in the work, and the assurance afforded that all were in good health."

Another series of provings, or rather of re-provings, demands notice as illustrating, *first*, the caution with which HAHNEMANN'S followers have received his experiments, and *secondly*, the testimony they bear to the wonderful accuracy with which he had recorded his observations. A society of physicians was formed in Vienna in 1842, for the purpose of re-proving a series of drugs. They had re-proved *aconite*, *bryonia*, *colocynth*, *natrum muriaticum*, *sulphur*, and *thuja*, and had made original provings of *coccus cacti*, *argentum nitricum* and *kali bichromicum*, when the repressive laws of a revolu-

tionary era compelled the dissolution of the society. In these re-provings details are given in full of each experimenter's alteration in health while taking the medicine. While confirming the reality of the drug-symptoms recorded by HAHNEMANN, they enable us to obtain a clearer insight into the action of each drug than the HAHNEMANNIAN method of arranging the symptoms permits us to do. American physicians have by their personal experiments, and the researches they have made amongst records of cases of poisoning done much to aid us in our drug resources.

In England comparatively little has been done, but that little has been unusually well done. I need only refer to the proving of *kali bichromicum*, by Dr. DRYSDALE; *naja*, by Dr. RUTHERFORD RUSSELL; *cedron*, by Dr. CASANOVA; *cotyledon umbilicus*, by Dr. CRAIG; and the *nitrate of uranium*, by Dr. EDWARD BLAKE, published in the *Hahnemann Society's Materia Medica*, and in the *British Journal of Homœopathy*.

Such, then, are the sources whence our vast and apparently perplexing *symptomen codex* has been derived. That a fundamental error was committed by HAHNEMANN when he contented himself with publishing merely a list of symptoms, separating them from their connection one with another, is much to be regretted. It has done more than almost anything else to repel an enquirer, to confuse a student, and to embarrass a practitioner, and that others should have followed in his footsteps in this particular, is equally a cause of regret, and still more unpardonable. All disjointed as they are, however, these catalogues of the symptoms of drugs have done admirable service, and are destined to do still greater.

The vast number of symptoms recorded as the effect of some drugs is a cause of much bewilderment at first sight. But a little study and reflection will soon disperse the cloud thus raised. It must be remembered that HAHNEMANN carefully noted *every* apparent disturbance of health in every one of his provers; he has published every symptom he could find attributed, with apparent justice, to every case of poisoning he could meet with in medical literature. Hence, we often find the same symptom frequently repeated in different words, each being numbered as though it were a different symptom or indication of some other form of disturbed health. This alone sufficiently explains the large array of symptoms met with in our registry of drug-provings.

The same comprehensiveness and minuteness of observation accounts for the considerable number of symptoms, which physicians, who are accustomed to pay attention only to the grosser and more marked indications of disease, not unnaturally regard as trivial, as fanciful, and as unworthy of notice. That they are often important, that they are indeed real manifestations of morbid action, and that they have proved of value in deciding the relative claims of two otherwise similarly-acting remedies, is the testimony of every physician who has surmounted those prejudices of education which run counter to their taking notice of such phenomena, and been ultimately guided in his selection by them.

Such, gentlemen, is the Materia Medica of those physicians who are directed by the homœopathic law in prescribing medicines for the sick. Such is the Materia Medica which I purpose in the lectures to be delivered here, expounding, illustrating, and pointing out the practical application of in the treatment of disease.

The question yet remains, how can we best study the results which have been accumulated, by what method can we most efficiently utilise them?

In the *first* place we have to obtain a clear conception of the sphere of a medicine's action. We must gather from the symptomatology whether the nervous system, the circulation, or the great function of nutrition is most disturbed; what tissues, whether serous, fibrous, muscular, or areolar, are throughout the body most prone to be affected. The reading of the symptoms by the light which physiology and pathology have afforded will seldom fail to give us an accurate knowledge of the general action. We thus learn whether the organism is excited or depressed, whether the class of cases to which the medicine will prove homœopathic is characterised by sthenia or asthenia. The information thus attained is, as you will easily see, often of the highest value in practice.

Secondly. Having studied its general action, we next investigate the local modifications produced by our medicine. We carefully examine the symptoms which have been observed in each organ, and from this examination we ascertain for what organs it has an elective affinity. It is in the fact that each drug influences one or more organs in preference to others, that we find a chief reason for our confidence in prescribing specifically.

Further, having ascertained the organ for which a drug has this elective affinity, we enquire on what part of the organ, what particular tissue of it, its action is excited. Is it, for example, the malpighian circulation or the secretory cells of the convoluted tubes that a medicine attracted to the kidney attacks?

And yet, again, we must discover the kind of action it sets up. Does a given drug stimulate in the first instance, or is it a depressant? It sets up morbid action in a given part of a given organ—and then comes the question, what is the nature of the action thus set up?

If you will investigate the properties of drugs in the manner now described, you will, I venture to say, find yourselves much richer in therapeutic resources than you ever were before; and, so far as the treatment of the vast proportion of acute disorders are concerned, you will be adequately armed to cope with them upon a homœopathic basis. In very many instances of chronic disease, likewise, the amount of information regarding the action of drugs thus afforded will be found ample to permit of your applying the law of similars with facility, accuracy, and success.* At the same time it must be admitted that there is a not inconsiderable

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* As illustrating the value of bringing a knowledge of the locality and kind of action of a poison to bear upon disease under the direction of the law of similars, I may here relate the circumstances of a case that was brought under my notice a few days ago. A friend of mine, a homœopathic physician in a large and important country town, was attending a case of pneumonia. The patient did well, but, just before convalescence could be fairly said to have begun, symptoms of meningeal effusion set in, and progressed with great rapidity. A fatal issue appeared inevitable, and a hospital physician of considerable repute met my friend in consultation. After seeing the patient with him, they retired for deliberation. The first remark made by the consultant was that the patient was dying, and that there was no room for treatment. My friend quite concurred with him in thinking the issue of the case necessarily fatal, but not liking to abandon treatment, he said to the consultant, "If you had been told that this patient had taken poison, what poison would you think she had taken?" The reply was, "One of the salts of copper," to which my friend rejoined, "Yes, then let us give her one of the salts of copper." After some discussion it was resolved to give her the twentieth of a grain of the sulphate of copper. This proved rather too large a dose, as it induced sickness and retching. The next given, after the subsidence of these symptoms, was the fiftieth of a grain. The result was that in twenty-four hours all indications of immediate danger had subsided, and recovery rapidly followed.

residuum of chronic cases, to cure which you must dig deeper into the mine of drug therapeutics.

If you rely in *all* cases upon the knowledge you have thus gained, to enable you to apply the law of similars in practice, you will meet with occasional disappointments—disappointments attributable not to the incurability of the disease, not to the inefficiency of the law as a therapeutic guide, not to the imperfection of the Materia Medica, but to the inadequate manner in which the law has been applied, and the partial manner in which the Materia Medica has been studied in the cases in the treatment of which you have met with your disappointment.

Regarded in its true light, the study, so far, of a medicinal proving is but the introduction to its clinical application. It enables us to understand more clearly its individual peculiarities, to recognise, more readily, the forms of disease in which these peculiarities are likely to occur, and to group the whole symptomatology in a manner calculated to fix a large though rough proportion of it in our memories.

But in not a few, especially chronic cases, there is but one course to pursue, and that it is a tedious, wearisome course, is true; nevertheless, it is one that is eminently satisfactory in its results. Having examined your case with the utmost thoroughness, you must look up the symptoms one after the other in the Repertory, and, having done so, examine them in the provings of the medicines to which the Repertory or index will direct you. The Repertory is an index to the symptomatology, as arranged in works on Materia Medica compiled after the manner of JAHR'S *Symptomen Codex*, ALLEN'S *Encyclopædia*, and HERING'S *Condensed Materia Medica*.

In the early days of homœopathy, ere the genius, so to speak, of the proved drugs was fairly understood, and before any considerable body of clinical evidence had confirmed the estimates that had been formed of the sphere of each drug, this method was inevitable in all cases, it is so still in some; though as pathology and pharmacology approach nearer to perfection, such cases diminish in number. "So many morbid states," says Dr. HUGHES, "are known to us only as an assemblage of phenomena that there is no other way of treating them than by comparing them at the time with our pathogenetic records, and fitting drug symptoms to those of disease."

This method has been illustrated as well as enforced by HAHNEMANN. The case in which it is illustrated is published in the preface to the 2nd vol. of his *Materia Medica*, and as it is not long I will read it to you, as it explains better than any words can do the original Hahnemannian method:—

Mrs. S., laundress, forty and odd years old, had been laid up for three weeks when she consulted me on the first of September, 1815.

1. At every movement, especially when treading, she has stitches in the pit of the stomach, coming, as she expresses it, from the left side; the stitches are worst when making a misstep.

2. When lying down she feels quite well; she has then no pain anywhere, neither in the side, nor in the pit of the stomach.

3. She cannot sleep after three o'clock in the morning.

4. She relishes her food, but after having eaten something, she feels an inclination to vomit.

5. When this inclination to vomit comes on, the water accumulates in her mouth, and runs out of it. as in waterbrash.

6. After every meal she has several empty risings.

7. She is of a vehement temper, disposed to be angry. When

the pain is violent, she is covered with sweat. Her menses are regular, and had ceased a fortnight ago.

No other abnormal symptoms.

As regards symptom No. 1, *belladonna*, *china* and *rhus toxic.* produce stitches in the pit of the stomach, but *none of them only during motion*, as in this instance. *Pulsat.* (s. symptom 345) causes indeed stitches in the pit of the stomach during a mis-step, but such stitches are a rare alternate effect of *pulsat.* Moreover, *puls.* has neither the same gastric symptoms as are here indicated in the relation of No. 4 to Nos. 5 and 6, nor is it analagous to the temperament of the patient.

Bryonia is the only remedy which produces pain from motion, and especially stitching pain, and likewise stitches (in the pit of the stomach) under the sternum, when raising the arm (95); during a mis-step it likewise causes stitches in other parts. (341, 400.)

The negative symptom No. 2 is especially corresponding to *bryonia* (430); but a few medicines (except perhaps *nux. v.* and an alternate symptom of *rhus tox.*, neither of which remedies corresponds to the rest of our symptoms) have no pain in a state of rest; this absence of pain corresponds, however, especially to *bryon.* (430 and many other symptoms.)

No. 3 indicates several drugs, also *bryon.* (475.)

Symptom No. 4, so far as the "inclination to vomit after a meal" is concerned, indicates several other drugs, (*ignatia*, *nux v.*, *mercury*, *iron*, *belladonna*, *pulsatilla*, *cantharides*), but is not so constant and usual with either of those drugs as with *bryonia*, and is much less accompanied with relish of food. (164.)

As regards symptom 5, several drugs, among which *bryonia*, cause an accumulation of saliva resembling waterbrash; but those other drugs do not produce the other symptoms of our group. *Bryonia* therefore deserves the preference in this respect.

The empty rising (of air merely after a meal (symptom 6) exists in but a few drugs, but in no drug is it as constant and characteristic as in *bryonia*. (143, 149.)

No. 7. One of the principal symptoms in diseases is the temper of the patient (s. Org. § 230, 231), also in this respect *bryonia* corresponds perfectly to the present case. From all these reasons *bryonia* deserves a preference over every other remedy in this case.

As the woman was very robust, and as the forces of disease had affected her organism so painfully that she was not able to continue her work, and as moreover her vital powers were unimpaired, I gave her a full drop of the tincture of *bryonia*, with direction to see me again in forty-eight hours. I told my friend E., who was present, that the woman's health ought to be restored after this period, which he doubted, not being yet fully converted to the new doctrine. In two days he returned to know the result, but the woman did not come. My friend, being impatient and determined to know what effect the medicine had produced, travelled to the village where the woman resided, to inform himself. He found the woman, and inquired of her why she had not returned? But she replied, "What should I do at the doctor's? Next day I was quite well and able to go about my washing, and ever since I have been as well as I am now. A thousand thanks to the doctor, but folks like me have no time to spare from their work; I had not earned a cent. for three weeks past."

Now, gentlemen, this method is indeed mechanical, and, superficially, looks simple enough. All, however, that is necessary in order to convince you that you must bring specially trained intelligence to bear upon carrying it out is, that you should *try* it. At the same time, one great object that, whether as teachers or practitioners, we should ever have in view, is—so to perfect our knowledge of pathology and pharmacology as to lessen the number of cases in which the mere mechanical method is the best that we can resort to when applying the law of similars in practice.

In endeavouring to discharge the duties of my office

here, I shall bring under your notice as many of those drugs which have received a full experimental investigation, as our time will allow me to do with some approach to thoroughness. In doing so, I propose to point out the sphere of action each drug has shown itself to occupy. Guided by the light of the manifestations of disordered health each has given rise to on the several organs and various tissues of the body, and, where available, taking advantage of the revelations of *post mortem* examinations, and of experiments which have been made on the lower animals, I intend to point out the forms of disease in which each drug is indicated, and has been proved to be useful; and further, I purpose, as far as I may be able, to direct your attention to the points of difference in the action of drugs, the general influence of which is similar. In this way I trust that I may be able to assist you in pursuing that study which, for a right understanding of the Materia Medica, for the acquisition of a power to handle its treasures successfully, each must, after all, undertake for himself.

To the end that you may derive as much advantage as may be obtained from your attendance here, I would advise your carefully reading the *Manual of Pharmacodynamics*, of which my accomplished predecessor in this lectureship, Dr. RICHARD HUGHES, is the author. A new and thoroughly revised edition of this very useful introduction to the study of Materia Medica, has, I am glad to be able to inform you, been published within the last few weeks.

I would also commend to your study the *Lectures on Materia Medica* by the late Dr. CARROLL DUNHAM, of New York. The remedies treated of by Dr. DUNHAM are not numerous, but so far as they go, they have been treated

of with great clearness, and in some instances, much fulness.

Arranged after the anatomical schema of HAHNEMANN, you will find the late Dr. CONSTANTINE HERING'S *Condensed Materia Medica*, a useful and practicable work of reference. Of the *Encyclopædia of Pure Materia Medica*, by Dr. ALLEN, of New York, it is impossible to speak too highly. Its only fault—if it be a fault—is that it has been somewhat overdone, that it contains pretty nearly every thing that has ever been recorded regarding the effects of a perfect host of drugs derived from the animal, vegetable, and mineral kingdoms of nature—the actual number being 763! The tenth and last volume contains also an appendix giving additional facts concerning no less than 274 of the substances which had been previously treated of—and as though it were impossible for Dr. ALLEN to come to a conclusion,—we find additional notes concerning no less than ten of these 274 in a supplementary appendix.

To this enormous work a copious index has been prepared, and will, I believe, be published before Christmas.

That a considerable proportion of the substances examined in this gigantic undertaking are of comparatively small value as therapeutic agents is true enough. But in preparing an Encyclopædia, Dr. ALLEN did not feel himself at liberty to omit any article regarding which he could obtain any evidence of physiological action. Then again the amount of repetition is enormous. This arises from the fact of the large number of observations that have been collected, and the full details which Dr. ALLEN felt himself bound to give of each. It could not fail to happen in such an arrangement that

the same symptom, the same condition would be constantly recurring. But you will see at once that the frequency with which these are repeated by the different provers in cases of poisoning is valuable evidence of their reality—of their being due to the action of the drug, and not dependent on some accidental circumstance.

By far the best, most easily studied, and most practicable for working purposes, is the *Hahnemann Materia Medica*, published by the Hahnemann Publishing Society in this country. Unfortunately, however, this work has been one of remarkably slow growth. So far, only the *bi-chromate of potash*, *aconite*, *arsenic*, *belladonna* and the *nitrate of uranium* have appeared. In order to furnish additional provings on the same plan, the society requires able and willing workers in collecting, arranging, and commenting upon well proved drugs.

In conclusion, gentlemen, allow me to express a hope that the time we shall spend here together during the ensuing session will, at its termination, be felt by you to have been advantageously employed. Sure I am that should it be otherwise the fault will most certainly be with the Lecturer, and not in his subject.

Gentlemen, the therapeutic art is, in the well-known words of Sir T. WATSON, "the supreme end of our profession," and while according to hygienic measures a a very high place among therapeutic agents, I am abundantly convinced that the judicious use of drugs in accordance with the homœopathic law, gives the physician, in the large proportion of cases of disease, a therapeutic power no other measure will afford him. I can scarcely expect you to follow me in so confident an expression of opinion. Thirty years of active practice, however, assure me that it is a correct opinion, while the

very confidence I feel demands from me full and clear expression. The drift of modern drug therapeutics convinces me that, in quarters where it would be inconvenient to regard the law of similars as a therapeutic principle of any clinical value at all, there is a good deal more than a shrewd suspicion that it is one of immense importance.

Knowing, as I well do, what a mine of therapeutic wealth has been opened up by the method of studying drugs and the mode of selecting them as curative agents promulgated by HAHNEMANN, I am before all things desirous to do what I can to render this source of therapeutic power more generally and more accurately known among my medical brethren than it is. Equally desirous am I to assist in rescuing important and partially known therapeutic facts from the oblivion with which their merely empirical announcement, their dissemination apart from the law of similars, unaccompanied by any of those precautions necessary to be known in their practical application, threatens them.

Most sincerely do I hope that some success in both directions may be the result of my meeting you here during the next six months.

THE

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